3			f Hazardous		t e	United States Environmental Protect Agency
	This initial notification required by Section 10 hensive Environmental sation, and Liability Adaptive Bernailed by June 9,	03(c) of the Compre I Response, Compe at of 1980 and mus	Please type or print	in ink. If you need	W W W	Washington DC 2046
A	Person Required to Notify:		Name Tiger	Corporation dba	Southwest Disp	oosa1
	Enter the name and a or organization require	ddress of the personed to notify.	n . 	Office Box 1139		
			_{City} Kilgor	•	State TX	Zip Code 75662
g√	Site Location: (7)	D 98-062		of Athens Landf		
	Enter the common name (if known) and actual location of the site.		Name of Oile	College Street		
	SAH	- TX07978	City Athens	county Hend	erson _{State} TX	Zip Code 757 3
C	Person to Contact: Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.		Name (Last, First and Title	Mobley, John	Prosident	
				64-5122	, rresident	
	D. 4. (1464.11					
D	Dates of Waste Har Enter the years that you treatment, storage, or ended at the site.	ou estimate waste	From (Year)	To (Year)	<u>.</u>	
			or sources, you are	Resource Conserved regulations (40 C Specific Type of EPA has assigned	vation and Recovery FR Part 261). Waste: I a four-digit number	ersons familiar with Act (RCRA) Section 3 to each hazardous w 1 3001 of RCRA. Ente
	overlap. Check each apcategory.	oplicable		appropriate four-	digit number in the bous wastes and code	oxes provided. A cops s can be obtained by e State in which the
	 □ Organics □ Inorganics □ Solvents 	2. 🗆 (Mining Construction Fextiles			
	4. □ Pesticides5. □ Heavy metals		Fertilizer Paper/Printing			
	6. ☐ Acids		_eather Tanning			
	7. Bases		ron/Steel Foundry			
	8. ☐ PCBs 9. ☐ Mixed Municipal		Chemical, General Plating/Polishing			
	10.XX Unknown		Military/Ammunition			
	11. ☐ Other (Specify)		Electrical Conductors			L
1			Transformers		94909)54
			Utility Companies			- 1-161 SILL SILL 1221
			Sanitary/Refuse Photofinish			• • • • · · · · · · · · · · · · · · · ·
		16. 🗆 I	Lab/Hospital		SUPERFUN	D FILE
,			Unknown	्रे इं	•	.:
	e e e e e e e e e e e e e e e e e e e	18. 🗆 (Other (Specify)		SEP 15	1992
	• •		·			·.
	Form Approved OMB No. 2000-0138				REORGAN	IZED
	C.112 110. 2000.0130			•	•	* * *

EPA Form 8900-1

	Notification of Hazardous Waste Site	Side Two	•					
F	Waste Quantity:	Facility Type	Total Facility Waste Amount					
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. ☐ Piles	cubic feet					
	In the "total facility waste amount" space	2. Land Treatment 3. Landfill	gallons					
	give the estimated combined quantity	4. 🗆 Tanks	Total Facility Area					
	(volume) of hazardous wastes at the site using cubic feet or gallons.	5. Impoundment	square feet					
	In the "total facility area" space, give the	6. □ Underground Injection7. □ Drums, Above Ground						
	estimated area size which the facilities occupy using square feet or acres.	8. Drums, Below Ground	acres					
		9. Other (Specify)	<u> </u>					
G	Known, Suspected or Likely Releases to the Environment:							
	Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.							
	Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.							
H	Sketch Map of Site Location: (Optional)							
	Sketch a map showing streets, highways, routes or other prominent landmarks near							
	the site. Place an X on the map to indicate							
	the site location. Draw an arrow showing the direction north. You may substitute a							
	publishing map showing the site location.		· · · · · · · · · · · · · · · · · · ·					
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- 1		en e						
	Description of Site: (Optional)							
•	Describe the history and present	erinder i de la servició de la companya de la comp La companya de la co	からない。 Particular and an analysis (1987)					
	conditions of the site. Give directions to the site and describe any nearby wells,							
	springs, lakes, or housing. Include such information as how waste was disposed							
	and where the waste came from. Provide	· ·						
	any other information or comments which may help describe the site conditions.							
	NOTE: SOUTHWEST I	DISPOSAL IS A COMMERCIAL SOL	ID WASTE COLLECTION COMPANY.					
	OPERATING IN THE I	KILGORE, LONGVIEW AND TYLER	AREAS SINCE 1966. ITS CONTAINER-					
		PROVIDED UNDER CONTRACT TO						
٠.		DENTIAL). WE DIPOSE OF THE ARFA. TO OUR KNOWLEDGE, WE	HAVE COLLECTED NO "HAZARDOUS					
	WASTES" AS DEFINE	D BY RCRA; HOWEVER, IN AN EF	FORT TO NOTIFY EPA OF					
	POSSIBLE MIXED MUI	NICIPAL WASTE, WE ARE SUBMIT	TING THIS FORM.					
J	Signature and Title:							
	The person or authorized representative (such as plant managers superintendents,	Name John Mobley, Presiden	— U Owner, Fresent					
	trustees or attorneys) of persons required	Street Post Office Box 9987	☐ Owner, Past					
	to notify must sign the form and provide a mailing address (if different than address		AWAITANSporter					
	in item A). For other persons providing notification, the signature is optional.	City Austin State						
	Check the boxes which best describe the relationship to the site of the person	Son Oholo.	6-9-81 Dther					
	required to notify. If you are not required to notify check "Other".	Signature	Date					